U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program Job: 23-402

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–6.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

| SECTION A – PROPERTY INFORMATION | | | | | FOR INSUR | RANCE COMPANY USE | |
|--|--|--------------------------|--|----------------------|---------------------|-------------------|--|
| A1. Building Owner's Name Juan Carlos & Alina Rodriguez Policy Number: | | | | | | ber: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 5321 Hawkhurst Avenue | | | | | AIC Number: | | |
| City | | State ZIP Code | | | | | |
| Southwest Rand | uthwest Ranches Florida 33331 | | | | | | |
| ' ' | A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Property ID: 504033020150 PB 100-17 Lot 15, of: "IVANHOE ESTATE" as per the Public Records of Broward County, Florida. | | | | | | |
| A4. Building Use (e. | g., Resident | ial, Non-Residential, A | ddition | , Accessory, etc.) | RESIDENTIAL | | |
| A5. Latitude/Longitu | de: Lat. 2 | 26°03'07.42"N | ong | 80° 20' 50.55" W | Horizontal Datur | n: NAD 1 | 927 × NAD 1983 |
| A6. Attach at least 2 | photograph | s of the building if the | Certific | ate is being used to | obtain flood insur | ance. | |
| A7. Building Diagran | n Number | 1B | | | | | |
| A8. For a building w | • | | | | | | |
| , . | • | pace or enclosure(s) | | 0 sq ft | | | |
| | | od openings in the cra | wlspac | e or enclosure(s) wi | thin 1.0 foot above | e adjacent gra | ade 0 |
| c) Total net area of flood openings in A8.b sq in | | | | | | | |
| d) Engineered f | ood opening | gs? |) | | | | |
| A9. For a building wi | A9. For a building with an attached garage: | | | | | | |
| a) Square footage of attached garage 465 sq ft | | | | | | | |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade0 | | | | | | | |
| c) Total net area of flood openings in A9.b sq in | | | | | | | |
| d) Engineered flood openings? Yes No | | | | | | | |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | | | |
| B1. NFIP Community Name & Community Number B2. County Name B3. State | | | | B3. State | | | |
| Town of Southwest Ranches - 120691 Broward Florida | | | | | | | |
| B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/ Revised Date B8. Flood Zoi | | B8. Flood Zone(s | (Zoı | se Flood Elevation(s) ne AO, use Base and Depth) |
| 12011C - 0540 | Н | 08/18/2014 | | 3/18/2014 | "AH" | 6.00 | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: | | | | | | | |
| FIS Profile FIRM Community Determined Other/Source: | | | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: | | | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes | | | | | | | |
| Designation Date: CBRS OPA | | | | | | | |
| | | | | _ | | | |

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding in | FOR INSURANCE COMPANY USE | | | | |
|---|---|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or B 5321 Hawkhurst Avenue | Policy Number: | | | | |
| City State Southwest Ranches Florid | ZIP C a 3333 | | Company NAIC Number | | |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) | | | | | |
| C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when con C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), V Complete Items C2.a–h below according to the building Benchmark Utilized: AH2254; Elev. +7.50' Ve Indicate elevation datum used for the elevations in iter NGVD 1929 NAVD 1988 Other/So Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawlspace) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member of d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment service (Describe type of equipment and location in Common f) Lowest adjacent (finished) grade next to building (I) g) Highest adjacent grade at lowest elevation of deck | Drawings* Build struction of the building struction of the building E, V1–V30, V (with BF) ig diagram specified in rtical Datum: NAVD 19 ins a) through h) below urce: as that used for the BF ice, or enclosure floor) (V Zones only) Sing the building ents) LAG) HAG) | ding Under Constr g is complete. E), AR, AR/A, AR/ Item A7. In Puerto 988 | uction* Finished Construction AE, AR/A1–A30, AR/AH, AR/AO. | | |
| structural support | NCINEED OF ARCI | UTECT CERTICI | CATION | | |
| SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a licensed land surveyor? | | | | | |
| Armando F. Alvarez Title Surveyor & Mapper Company Name AFA & Company, Inc. Address 13050 SW 133rd Court City Miami Signature | s for (1) community offication (2(e), if applicable) | ZIP Code 33186 Telephone 05) 234-0588 cial, (2) insurance a | STATE OF FLORIDA Sur veyor Sur veyor surveyor su | | |

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corresponding information from | FOR INSURANCE COMPANY USE | | | | |
|--|---|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. 5321 Hawkhurst Avenue | Policy Number: | | | | |
| • | ZIP Code 33331 | Company NAIC Number | | | |
| SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) | | | | | |
| For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate complete Sections A, B, and C. For Items E1–E4, use natural grade, if availar enter meters. E1. Provide elevation information for the following and check the appropriate the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, | ble. Check the measure boxes to show whether | r the elevation is above or below Sabove orbelow the HAG. | | | |
| crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood openings provided in S the next higher floor (elevation C2.b in the diagrams) of the building is E3. Attached garage (top of slab) is | feetmeter: cection A Items 8 and/or feetmeter: feetmeter: | 9 (see pages 1–2 of Instructions), sabove orbelow the HAG. | | | |
| E4. Top of platform of machinery and/or equipment servicing the building is E5. Zone AO only: If no flood depth number is available, is the top of the bot floodplain management ordinance? Yes No Unknown. | | | | | |
| SECTION F – PROPERTY OWNER (OR OWNER'S R | | | | | |
| The property owner or owner's authorized representative who completes Sec community-issued BFE) or Zone AO must sign here. The statements in Section | ctions A, B, and E for Zo | ne A (without a FEMA-issued or | | | |
| Property Owner or Owner's Authorized Representative's Name | | | | | |
| Address City | Sta | ate ZIP Code | | | |
| Signature Date | Tel | lephone | | | |
| Comments | | | | | |
| | | Check here if attachments. | | | |

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the corre | FOR INSURANCE COMPANY USE | | | | |
|--|---------------------------|------------------------------|---------|---|--|
| Building Street Address (including Apt., Unit, St 5321 Hawkhurst Avenue | Policy Number: | | | | |
| City Southwest Ranches | State Florida | ZIP Code 33331 | | Company NAIC Number | |
| SECTIO | N G – COMMUNI | TY INFORMATION (OPTIO | NAL) | | |
| The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters. | | | | | |
| G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) | | | | | |
| G2. A community official completed Section Zone AO. | on E for a building | located in Zone A (without a | a FEMA | -issued or community-issued BFE) | |
| G3. The following information (Items G4– | G10) is provided for | or community floodplain mar | nagemei | nt purposes. | |
| G4. Permit Number | | | | ate Certificate of ompliance/Occupancy Issued | |
| G7. This permit has been issued for: | New Construction | n Substantial Improveme | ent | | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) | [| feet | meters Datum | |
| G9. BFE or (in Zone AO) depth of flooding at t | he building site: | | feet | meters Datum | |
| G10. Community's design flood elevation: | - | | feet | meters Datum | |
| Local Official's Name | | Title | | | |
| Community Name | | Telephone | | | |
| Signature Date | | | | | |
| Comments (including type of equipment and loc | cation, per C2(e), if | f applicable) | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | Check here if attachments. | |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy th | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|----------|---------------------|
| Building Street Address (including Apt., | Policy Number: | | |
| 5321 Hawkhurst Avenue | | | |
| City | State | ZIP Code | Company NAIC Number |
| Southwest Ranches | Florida | 33331 | |

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption FRONT VIEW (04/05/2023)



Photo Two Caption REAR VIEW (04/05/2023)

| IMPORTANT: In these spaces, copy | FOR INSURANCE COMPANY USE | | |
|---|---------------------------|----------|---------------------|
| Building Street Address (including Apt. 5321 Hawkhurst Avenue | Policy Number: | | |
| City | State | ZIP Code | Company NAIC Number |
| Southwest Ranches | Florida | 33331 | |

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One Caption RIGHT VIEW (04/05/2023)



Photo Two Caption LEFT VIEW (04/05/2023)